The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD 1 0 / 5 4 2 0 7 5

t													
l		CLAÎMS AS FILED - PART I							ENT	ITY		ОТН	ER THAI
ŀ			(C	olumn 1)		(Column 2)		TYPE			(LL ENTI
Ľ	J.S. NATION	IAL STAGE FEE	s					RATE		FEE	7	RATE	F
6	BASIC FEE		SMALL	ENT. = \$ 150	LAF	RGE ENT = \$ 30	0	BASIC FEE			\neg	R BASIC FEE	30
ε	XAMINATION	I FEE		CT Article 33(1)- \$ 50 / \$ 100	An	other situations \$ 100 / \$ 200	=	EXAM. FEE				EXAM. FEE	120
s	EARCH FEE		ALL other	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		SEARCH FEE				SEARCH FE	
FE	EE FOR EXTE	RA SPEC. PGS.		minus 100 =		/ 50 =		X \$ 125 =			7	X \$ 250	=
TC	OTAL CHARG	EABLE CLAIMS	23	minus 20 = ,	. 3	>		X \$ 25 =			OF	X \$ 50 =	15
N	DEPENDENT	CLAIMS	2	_minus 3 =	•		1	X \$ 100	=		OF	X \$ 200	
ИL	JLTIPLE DEP	ENDENT CLAIM I	PRESENT				7	+\$ 180	=		OF	+ \$ 360 =	=
- (If the differer	nce in column 1	ero, enter "0"	' in co	lumn 2	_	TOTAL			OR	L	1057	
-		(Column 1) CLAIMS REMAINING	S AMENDE	(Column	n 2) ST	(Column 3) PRESENT		SMALL	7	ADDI-	OR	SMALL	R THAN ENTITY ADDI
AINDIMEN A		AFTER AMENDMENT		PREVIOUS PAID FO		EXTRA		RATE		ONAL FEE		RATE	FEE
	Total	·	Minus			=		X \$ 25 =	L		OR	X \$ 50 =	ļ
	Independent	1.	Minus	***		=		X \$ 100 =	_		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =			OR	+ \$ 360 =	
								FEE	Ŀ		ÓR	FEE	
	_	(Column 1)		(Column 2	2)	(Column 3)			-				
H		CLAIMS REMAINING AFTER AMENDMENT	*	HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA		RATE	TIC	DOI- NAL EE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	=		ſ	X \$ 25 =			OR	X \$ 50 =	
	ndependent	•	Minus	***	=	=		X \$ 100 =		\Box	OR	X \$ 200 =	
Γ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =			OR	+\$360=	
					-		. T	OTAL ADDIT. FEE			OR T	OTAL ADDIT. FEE	
	٠												
tr (the entry in colum	nn 1 is less than the	entry in column 2	, write "0" in colu	mn 3.								
1	the "Highest Nur	mber Previously Paid	FOR MY THUS SP	ACE is less than	20', er								